DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10008149-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or

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Number				nternational Application
			ed on	
recluding the claims, disclose all information foreign Application(s) and/ I hereby claim foreign prior	as amend on which in for Claim of rity benefits	ded by any amendmen s material to patentabi Foreign Priority s under Title 35, United Star	it(s) referred to abor lity as defined in 37 ses Code Section 119 of	e above-identified specifica ve. I acknowledge the dut CFR 1.56. any foreign application(s) for pat r patent or inventor(s) certificate h
a filing date before that of	the applicat	ion on which priority is clair	ned:	r patent or inventor(s) certificate r
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U S C
				YES NO
				YES. NO
Provisional Application				
I hereby claim the benefit below:	under Title	35, United States Code Sec	tion 119(e) of any United	d States provisional application(s)
		APPLICATION NUMBER	FILING DATE	
U. S. Priority Claim	L			
manner provided by the fir information as defined in Ti	ter of each o st paragrapl itle 37, Cod	of the claims of this applica h of Title 35, United States e of Federal Regulations, Se	tion is not disclosed in th Code Section 112, I ack ction 1.56(a) which occu	States application(s) listed below ne prior United States application nowledge the duty to disclose ma rred between the filing date of the
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Inventor's Signature

Date

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10008149-1

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Inventor's Signature		Date				
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Residence:	2747 Del Medio Ct., Mountain V	iew, CA	94040			
Post Office Address:	N/A					
Inventor's Signature		Date				
		Buto				
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Inventor's Signature		Date				
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Residence:	90, rue de Marechal Oudinot, Na	ncy, Fran	ce 54000			
Post Office Address:	N/A					
Inventor's Signature		Date				
ŭ		Date				
Full Name of # 6 joint inventor	•		Citizenship:			
Residence:			Citizensing.			
Post Office Address:						
Fost Office Address:						
Inventor's Signature		Date				
Full Name of # 7 joint inventor	r:		Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature						
ontor o orginataro		Date				
Full Name of # 8 joint invento	. .		Chinamahim			
			Citizenship:			
Residence:						
Post Office Address:		·				
Inventor's Signature		Date				